



WWW.THECURTAINBOX.COM  
**THE CURTAINBOX THEATRE Co.**

**Name:** \_\_\_\_\_ **Age** (if under 18): \_\_\_\_\_

**Address:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Day Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Class Enrolling For:** \_\_\_\_\_ **Fee:** \$ \_\_\_\_\_

**Payment Type:** Cash \_\_\_\_\_ Check \_\_\_\_\_

*(\*\*Please feel free to send payment via the mail or arrange an initial session and make payment in person. If mailing in your registration and payment, our **mailing** address is: **THE CURTAINBOX THEATRE CO. 1124 Holmes St. Bettendorf, IA. 52722**)*

**Past experience related to this class:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**How did you hear about us?** \_\_\_\_\_  
\_\_\_\_\_

Please note: Enrollment in the class is not secure until payment is received.

**Thank you for your support and we look forward to getting to know you!**